PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance ree normes	шопз.						
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
28075	7590 02/19	/2010					
1221 NICOLLE SUITE 800		TE, LLC	I b St ad tra	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
MINNEAPOLIS, MN 55403-2420				THU H. LĘ-TO		(Depositor's name)	
				w		(Signature)	
				MAY 19, 2010		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/667,909	10/667,909 09/22/2003		Richard F. Murphy	rphy 1001.1530101		9920	
TITLE OF INVENTION	I: SURFACE MODIFIEI	D REINFORCING MEM	BER FOR MEDICAL DI	EVICE AND METH	OD FOR MAKING SAME		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	E DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/19/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	_			
KOHARSKI, CHRISTOPHER 3763			604-527000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, alternate (2) the name of a single registered attorney or 2 registered patent att	1. For printing on the patent front page, list 1) the names of up to 3 registered patent attorneys ragents OR, alternatively, 2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is isted, no name will be printed. 1 CROMPTON, SEAGER & TUFTE, LLC 2 3			
PLEASE NOTE: Unl recordation as set fort (A) NAME OF ASSIG	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee oletion of this form is NO	THE PATENT (print or ty data will appear on the IT a substitute for filing an (B) RESIDENCE: (CIT MAPLE GROVE	patent. If an assigned assignment. Y and STATE OR C		document has been filed for	
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛛 Co	rporation or other private gr	oup entity Government	
4a. The following fee(s) are submitted: ✓ Issue Fee ✓ Publication Fee (No small entity discount permitted) ✓ Advance Order - # of Copies ONE (1)			Hb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0413 (enclose an extra copy of this form).				
5. Change in Entity Sta	tus (from status indicated s SMALL ENTITY state		☐ b. Applicant is no lo	nger claiming SMAL	L ENTITY status. See 37 C	2FR 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requestroords of the World Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than	the applicant; a regis	tered attorney or agent; or t	he assignee or other party in	
Authorized Signature			Date				
Typed or printed name J. SCOT WICKHEM			Registration No. 41,376				
This collection of inform an application. Confiden submitting the completes	nation is required by 37 C tiality is governed by 35 d application form to the	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or I.I.4. This collection is e depending upon the induce Chief Information Office	retain a benefit by the stimated to take 12 n ividual case. Any cor-	ne public which is to file (an inutes to complete, including mments on the amount of the produced of the produ	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O.	

uns form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.